MaineHealth

August 29, 2019

Ajit Pai Chairman Federal Communications Commission 445 12th St. SW Washington, DC 20554

RE: WC Docket No. 13-214; FCC 19-64, Promoting Telehealth for Low-Income Consumers.

Dear Chairman Pai:

On behalf of MaineHealth, Maine's largest integrated non-profit health care system, the patients we serve and the staff we employ, we appreciate the opportunity to comment on the provisions contained in the Federal Communications Commission's (FCC), "Promoting Telehealth for Low-Income Consumers" proposed rule.

Who We Are

<u>Our Members, Our Employees and Our Mission:</u> As Maine's largest non-profit health care system, MaineHealth provides a full continuum of health care services to the residents of eleven counties in Maine and one in New Hampshire. Throughout MaineHealth's service area, we provide access to high-quality care at 8 acute care hospitals, dozens of primary care offices and in patient's homes through Maine Health Care at Home.

MaineHealth is proud of its commitment to meeting its mission of, "Working together so our communities are the healthiest in America." It does so through the provision of a comprehensive array of high quality, patient-centered health care services, from primary care to oncology, for all patients, regardless of ability to pay. MaineHealth also invests substantial resources in meeting the public health needs of the communities it serves. With a commitment to utilizing scarce resources as effectively as possible, MaineHealth greatly values innovation leading to better outcomes and lower costs.

Our Patient Population: Maine's demographics pose unique challenges for health systems seeking to expand, or even maintain, access to care. As the state with the oldest median age in the country, MaineHealth's members serve a disproportionate number of Medicare patients and thus rely on Medicare payments (which cover just 83% of cost) as a major source of revenue. The payer mix of our members is further challenged by stagnant rural economies resulting in higher rates of bad debt and charity care and a reliance on Medicaid payments (which cover just 72% of cost). Finally, the rurality of MaineHealth's service area creates barriers to access for patients. Just two of MaineHealth's acute care hospitals are in areas deemed urban by HRSA, and MaineHealth's service area includes 13 Geographic Health Professional Shortage Areas (for primary care or mental health care).

Phone: 207-661-7001

Fax: 207-661-7029

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Our Experience with Telehealth: Utilizing telehealth has been one strategy to combat the challenges posed by MaineHealth's patient population over the organization's history. MaineHealth Care at Home has been involved in the use and development of telehealth since 2001, with a focus on using technology and building care and treatment models to keep individuals with chronic illnesses safely at home.

In recent years, MaineHealth Care at Home has also partnered with low-income housing providers and island communities to address inequities in our community through Connected Care Clinics. These clinics incorporate telehealth technology to create 'virtual clinic' opportunities for residents that supplement in-person clinics. The aims in expanding telehealth technology to these communities include expanding access to care, promoting primary and preventative care, reducing preventable hospitalizations and having a positive impact on community health.

In 2018 alone, 990 MaineHealth Care at Home patients had over 44,000 patient encounters via telehealth. This population expressed high satisfaction, had high patient adherence (81-87%) and experienced 30-day hospital readmission rates 27.3% below the national average. With MaineHealth Care at Home providing traditional home health services to more than 22,000 patients annually, there is significant room to expand its telehealth utilization.

As a health system facing the challenges of caring for large numbers of low-income patients, MaineHealth has seen the value of expanded access to care provided by telehealth. However, the financial constraints of being a rural, non-profit health system make large investments in telehealth difficult, if not impossible, for a system like MaineHealth to complete without assistance. Support from programs such as the FCC's Healthcare Connect Fund are instrumental in creating the ability to offer these services to more patients, and MaineHealth supports efforts to ensure that the Healthcare Connect Fund is robust enough to fulfill all requests for funding.

The pilot detailed in the proposed rule is another exciting opportunity for health systems such as ours and the patients we serve. In light of MaineHealth's experience expanding access and improving outcomes through telehealth, and our interest in this proposed pilot program, we offer specific comments on the proposal below.

Operation of the Connected Care Pilot as a New Program

MaineHealth strongly supports the provision that would operate the proposed pilot as a new program within the Universal Service Fund. Lack of funding is a clear barrier to health systems seeking to expand telehealth services. The qualifying costs to create new capabilities and the costs to maintain current access are significant, and often it is the patients of rural health systems that could benefit the most from the increased access provided by telehealth. For these reasons, MaineHealth is excited by the prospect of a completely new program within the USF focused on health care facilities.

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Scope of the Locations Covered by the Proposal: As a health system that consists of Maine's largest tertiary care center, Maine Medical Center, which is licensed for 637 beds in downtown Portland, as well as several critical access hospitals, MaineHealth appreciates the FCC's proposal to open the pilot program to both urban and rural health care providers. MaineHealth believes an effective program under this pilot would benefit patients in rural areas while utilizing resources that are more available in urban areas.

Scope of the Conditions Covered by the Proposal: The proposal would limit the pilot program to projects primarily focused on treating health conditions that typically require at least several months or more to treat. MaineHealth's telehealth efforts have primarily focused on treating chronic conditions such as diabetes and COPD. With that being said, MaineHealth encourages the FCC to allow for flexibility in the pilot program for participants to treat or monitor a range of conditions. Telehealth allows for innovation and any proposal to expand telehealth capabilities should allow flexibility for applicants to innovate.

Thank you for the opportunity to comment on this proposed rule. MaineHealth appreciates the FCC's continued interest in expanding access to telehealth to the rural, low-income populations we serve.

Sincerely,

Katie Fullam Harris, Senior Vice President, Government Relations